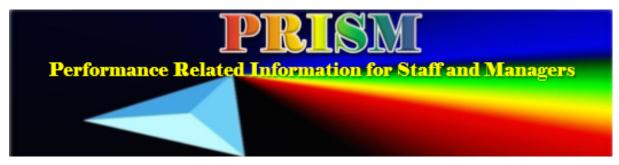


Government of the District of Columbia Department of Behavioral Health (DBH)





Sep-20

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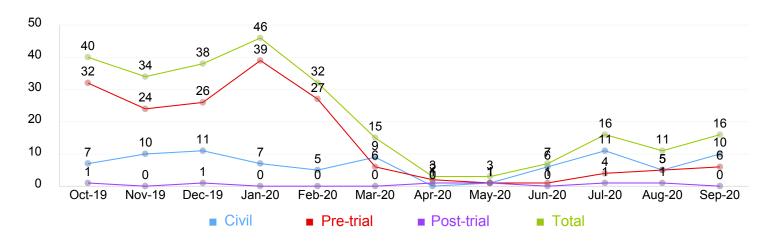
Data Disclaimer

The primary source of data extracted and analyzed herein is Avatar, the Saint Elizabeths Hospital's electronic medical record system. Additional data sources include, but are not limited to, the Hospital's Unusual Incident Database and SiteFM. Data reflect information as entered in each system by users. Data and Performance Management (DPM) has made reasonable efforts to ensure that data and its accompanying information are as accurate and up-to-date as possible at the time of analysis and publication, but does not guarantee the accuracy, reliability, or completeness of data. DPM is not liable for any misinterpretation or misuse of the data. Use of any information from PRISM must be fully acknowledged and/or cited. Use of PRISM data for anything other than patient care determinations or management of the services provided within the hospital (including external publications, research papers, presentations, etc.) is prohibited without written permission from the Chief Quality and Data Manager Officer at the Saint Elizabeths Hospital.

As of May, 2019 a new platform, Microstrategy, was implemented for producing PRISM. At that time, two charts were removed from the report. Admissions vs Patient UI rate was removed because it showed two data points that already existed in other charts and put them together. Percentage of SiteFM Work Orders Completed within 3 Days was removed because it related to internal operations. Data from the appendix tables were integrated into the relevant charts.

Microstrategy is a visualization tool that is linked to the data sources for each chart, so the information is not static. If new information is added for a month that has already been reported on, that update will be reflected in the next month's report.

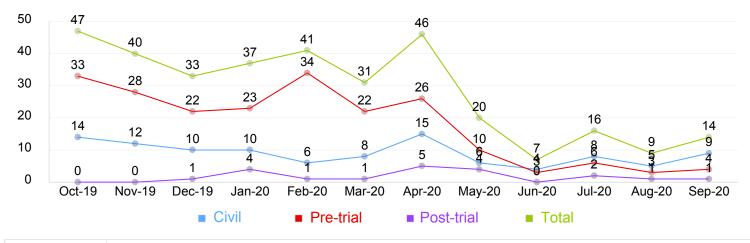
1. Admissions



Metrics							Admissi	on Count						
Legal Status Group	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Avg	Total
Civil	7	10	11	7	5	9	0	1	6	11	5	10	7	82
Pre-trial	32	24	26	39	27	6	2	1	1	4	5	6	14	173
Post-trial	1	0	1	0	0	0	1	1	0	1	1	0	1	6
Total	40	34	38	46	32	15	3	3	7	16	11	16	22	261

^{*} Number of admissions to SEH inpatient program, including transfers from forensic outpatient to inpatient program.

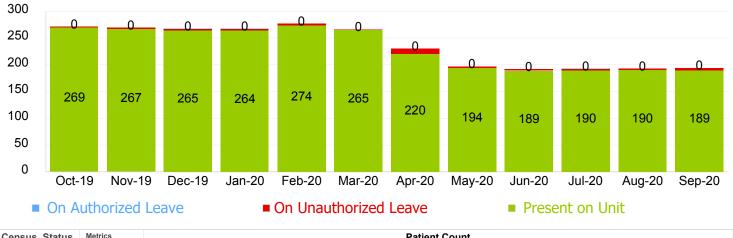
2. Discharges



							Dischar	ge Count						
Legal Status Group	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Avg	Total
Civil	14	12	10	10	6	8	15	6	4	8	5	9	9	107
Pre-trial	33	28	22	23	34	22	26	10	3	6	3	4	18	214
Post-trial	0	0	1	4	1	1	5	4	0	2	1	1	2	20
Total	47	40	33	37	41	31	46	20	7	16	9	14	28	341

^{*} Number of discharges from SEH inpatient program, including transfers from inpatient to forensic outpatient program.

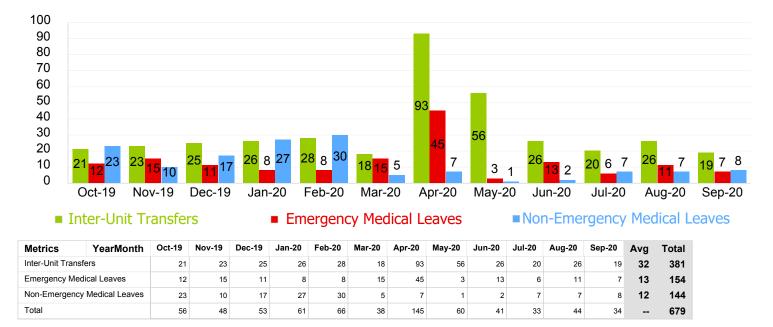
3. Average Daily Census



Census_Status	Metrics						Р	atient Co	unt					
	YearMonth	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Average
a. Present on Unit	t	269	267	265	264	274	265	220	194	189	190	190	189	231
b. On AL		2	3	2	2	3	1	10	3	3	3	3	5	3
c. On UL		0	0	0	0	0	0	0	0	0	0	0	0	0
Total		271	269	267	267	277	266	230	197	192	192	192	194	

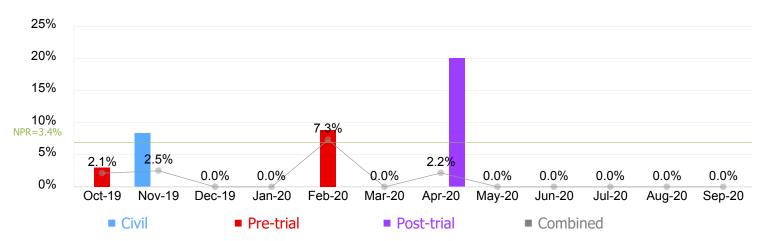
^{*} Data above is the daily average number of individuals counted at 11:59 PM every day during each month. Census data is tracked via the AVATAR database.

4. Transfers



^{*} Number of inter-unit transfers that occurred during month and number of emergency medical leaves that were initiated during month. Challenges related to the COVID-19 pandemic required the hospital to transfer individuals in care to assure proper cohorting based on acuity and COVID status (positive, negative, PUI). The marked increase in transfers April 2020 and onward reflects the change to manage suspected and confirmed COVID-19 cases.

5. 30-Day Readmission Rate

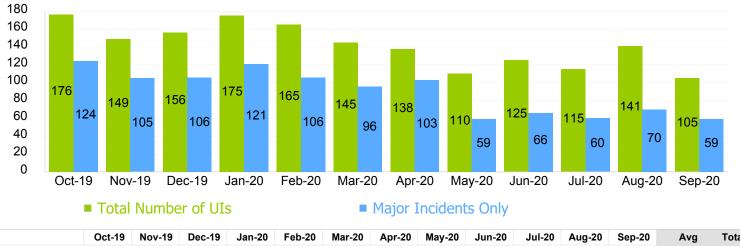


						Read	dmission F	Rate					
Legal Status Group	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Avg
Civil	0.0%	8.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.7%
Pre-trial	3.0%	0.0%	0.0%	0.0%	8.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.0%
Post-trial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	20.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.2%
Combined	2.1%	2.5%	0.0%	0.0%	7.3%	0.0%	2.2%	0.0%	0.0%	0.0%	0.0%	0.0%	1.2%

^{*} Percent of discharges that returned to SEH within 30 days of discharges. It does not include those who may have been re-hospitalized at another psychiatric facility. This measure requires 30-day observation following discharge.

^{**} The post-trial denominators (discharges) per month range only between one and six, making the monthly re-admission rate high when there is any. For example, in December 2014, there was only one post-trial discharge, which was readmitted within 30 days. Thus, the 30-day readmission rate for post-trial discharge at that time was 100%.

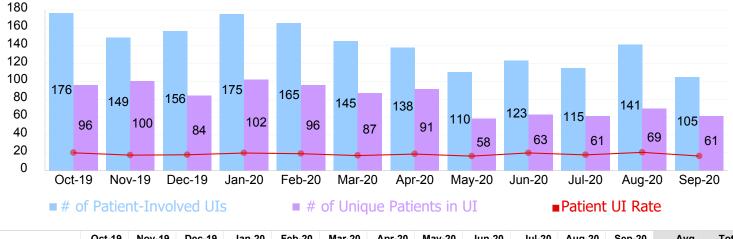
6. Unusual Incidents



	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Avg	Total
Major Incidents Only	124	105	106	121	106	96	103	59	66	60	70	59	90	1,075
Total Number of Uls	176	149	156	175	165	145	138	110	125	115	141	105	142	1,700

^{*} A Major Unusual Incident is any adverse even that can compromise health, safety, and welfare of individuals in care and/or staff. An Unusual Incident is any significant occurrence or extraordinary event deviating from regular routine or established procedure, but does not rise to the level of MUI.

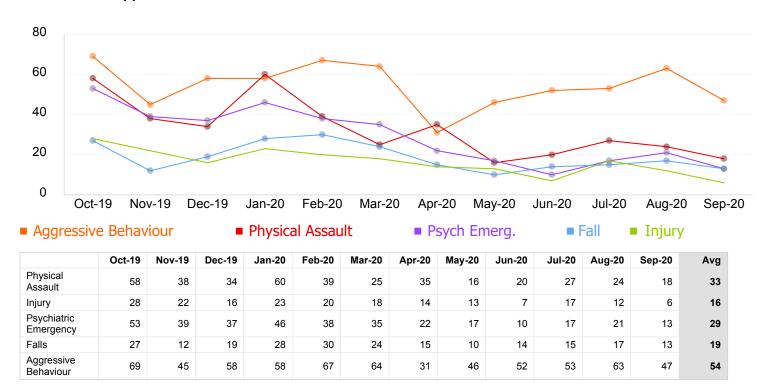
7. Patient-Involved Unusual Incidents



	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Avg	Total
# of Unique Patients in UI	96	100	84	102	96	87	91	58	63	61	69	61	81	968
Patient Involved UI	169	141	148	164	153	140	129	100	115	106	123	96		-
Patient UI Rate	20.02	17.39	17.80	19.76	19.00	16.91	18.61	16.29	19.87	17.69	20.51	16.40	18.36	

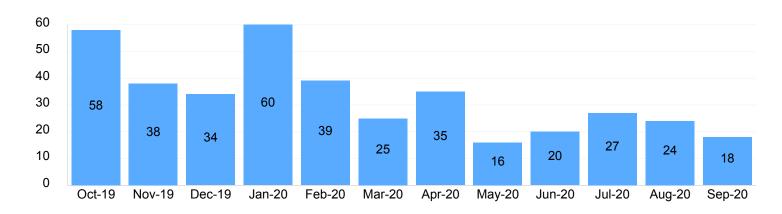
^{*} The patient UI rate is the number of patient-involved unusual incidents reported for every 1000 inpatient days.

8. Selected Types of Incidents



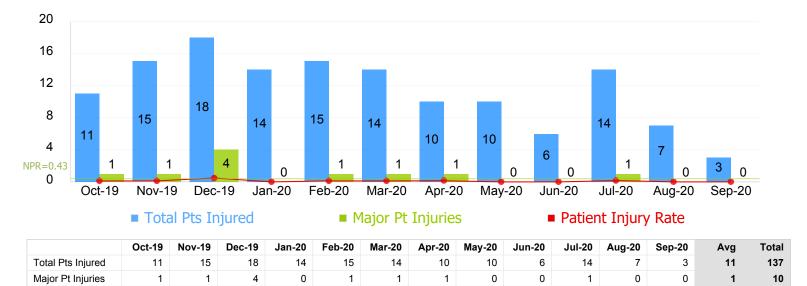
^{*} These are incident types that are frequently reported. Some incidents may be counted in multiple categories. For example, a physical assault incident that accompanied psychiatric emergency and injury is counted under psychiatric emergency and injury as well as under physical assault. Injury is broadly defined to include any type of injury, regardless of the cause or severity level.

9. Physical Assaults



						Physical	Assault							
Oct-19	Oct-19 Nov-19 Dec-19 Jan-20 Feb-20 Mar-20 Apr-20 May-20 Jun-20 Jul-20 Aug-20 Sep-20 Avg Total													
58	38	34	60	39	25	35	16	20	27	24	18	33	394	

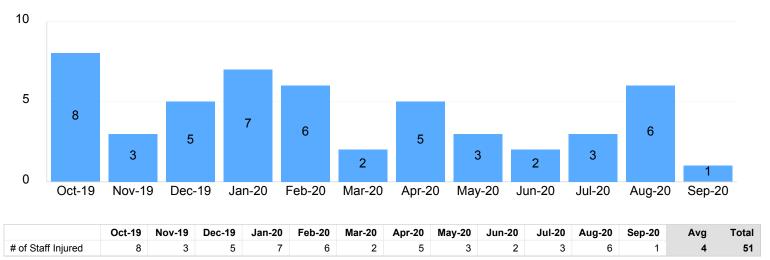
10. Patient Injuries

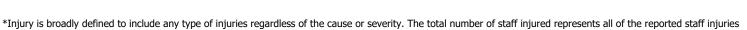


Patient Injury Rate 0.12 0.12 0.48 0.00 0.12 0.12 0.14 0.00 0.00 0.17 0.00 0.00 **0.11***Injury is broadly defined to include any type of injuries regardless of the cause or severity level. The total number of patients injured represents all of the reported injuries

*Injury is broadly defined to include any type of injuries regardless of the cause or severity level. The total number of patients injured represents all of the reported injuries including minor injuries treated with first aid alone. However, the patient injury rate considers only the number of patient injuries that required treatment for minor injuries based on the NRI definition. The patient injury rate is the number of 'major' patient injuries per every 1000 inpatient days.

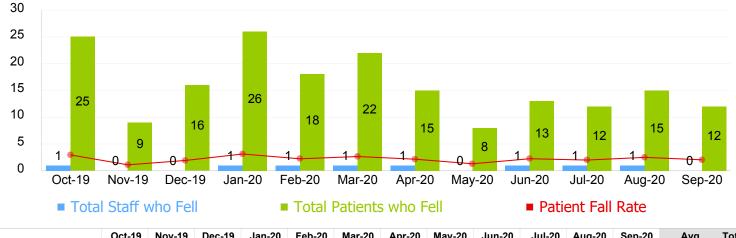
11. Staff Injuries





12. Patient and Staff Falls

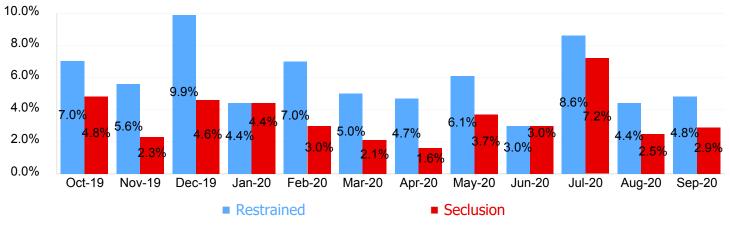
including treatment for minor injuries.



	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Avg	Total
Total Staff who Fell	1	0	0	1	1	1	1	0	1	1	1	0	1	8
Total Patients who Fell	25	9	16	26	18	22	15	8	13	12	15	12	16	191
Patient Fall Rate	2.96	1.11	1.92	3.13	2.24	2.66	2.16	1.30	2.25	2.00	2.50	2.05	2.19	

 $[\]ensuremath{^*}$ The patient fall rate is the number of patient falls per every 1000 inpatient days.

Percent of Patients Restrained or Secluded



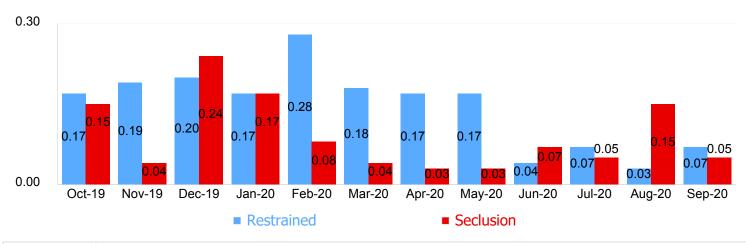
	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Avg
Seclusion	4.8%	2.3%	4.6%	4.4%	3.0%	2.1%	1.6%	3.7%	3.0%	7.2%	2.5%	2.9%	3.5%
Restraint	7.0%	5.6%	9.9%	4.4%	7.0%	5.0%	4.7%	6.1%	3.0%	8.6%	4.4%	4.8%	5.9%

As of July 2020 the National Public Rates (NPR) are as follows: % of Patients Restrained NPR = 7.749 and the % of Patients Secluded NPR = 2.66.

Percent of unique patients who were restrained at least once and percent of unique patients who were secluded at least once. The denominator includes all individuals who were served in care 1+ day during month.

***As of May, 2019, SEH refined the logic of this calculation to count patients who were restrained via a physical hold and a mechanical restraint only once. Previous logic counted the same person twice if they received both a physical hold and mechanical restraint in the same month.

14. Restraint Hours Rate & Seclusion Hours Rate



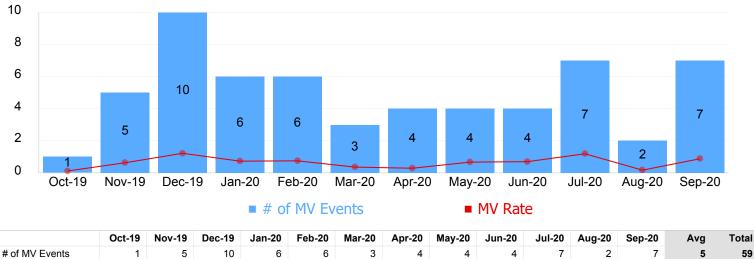
Event Type							Hour Rate						
Event Type	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Avg
Restraint	0.17	0.19	0.20	0.17	0.28	0.18	0.17	0.17	0.04	0.07	0.03	0.07	0.15
Seclusion	0.15	0.04	0.24	0.17	0.08	0.04	0.03	0.03	0.07	0.05	0.15	0.05	0.09

As of July 2020 the National Public Rates (NPR) are as follows: Restraint Hours Rate NPR = 0.406 and the Seclusion Hours Rate NPR = 0.332.

^{*} Restraint/Seclusion Hours Rate: Number of hours spent in restraint/seclusion for every 1000 inpatient hours.

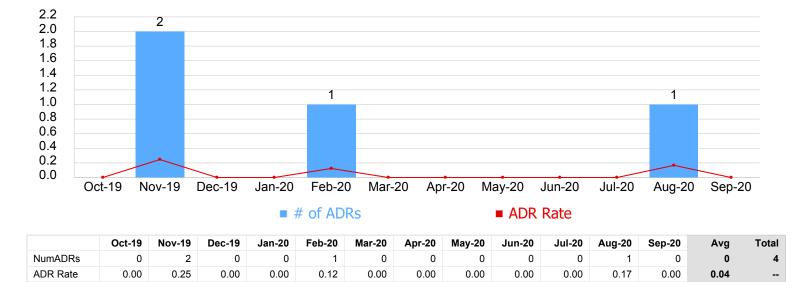
^{**} The duration of each physical hold event is counted as 1 minute as a physical hold is ordered and used only as a temporary intervention that lasts less than a minute to break up any physical conflicts or to administer emergency medications

15. Reported Medication Variance Events & Rate



MV Rate 0.12 0.63 1.22 0.73 0.75 0.36 0.29 0.67 0.70 1.19 0.17 0.88 **0.64 7.71**

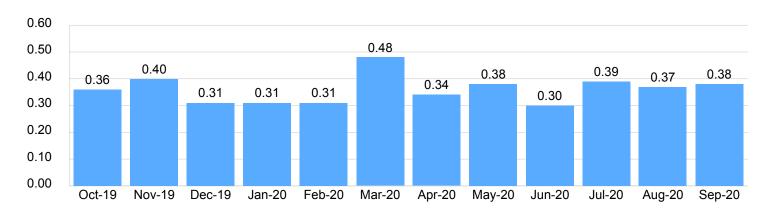
16. Reported Adverse Drug Reactions & Rate



st ADR Rate: Number of reported adverse drug reaction events that occurred for every 1000 inpatient days.

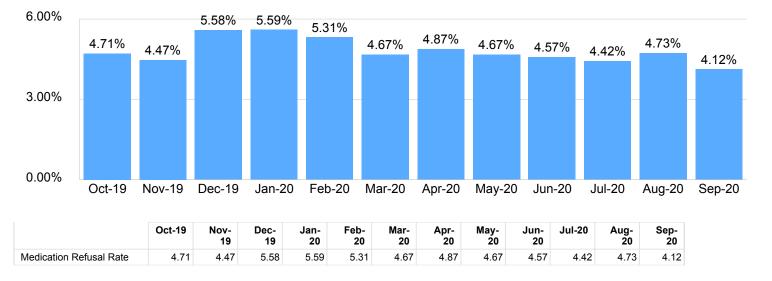
^{*} MV Rate: Number of reported medication variance events that occurred for every 1000 inpatient days.

17. Percent of Missing Documentation on Med-Administration



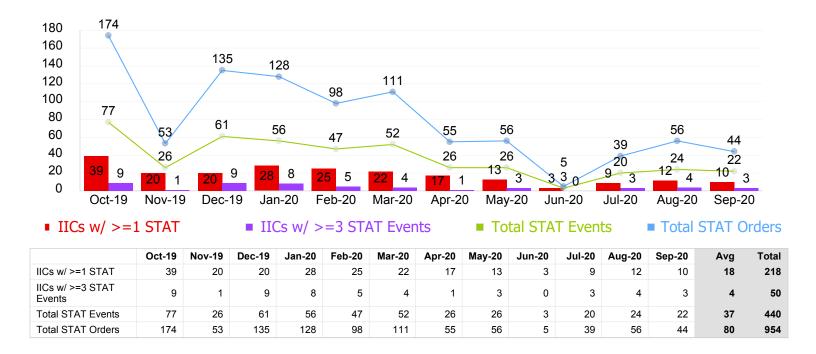
Event Type							Rate						
Event Type PercOfMissingDocumentation	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Avg
PercOfMissingDocumentation	0.36	0.40	0.31	0.31	0.31	0.48	0.34	0.38	0.30	0.39	0.37	0.38	0.36

18. Medication Refusal Rate



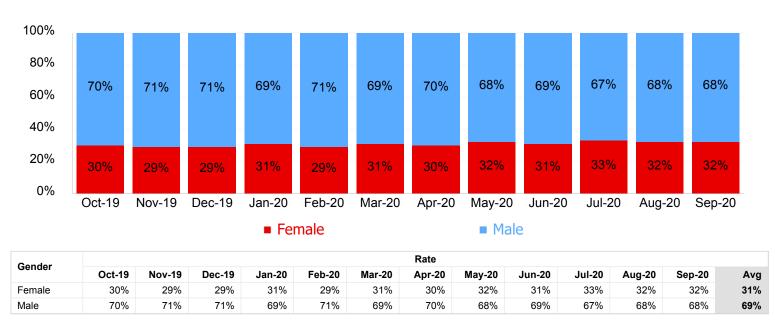
^{*} Medication Refusal Rate: the number of refused medication doses divided by the total number of doses scheduled for administration.

19. Number of STAT Events and Individuals Involved

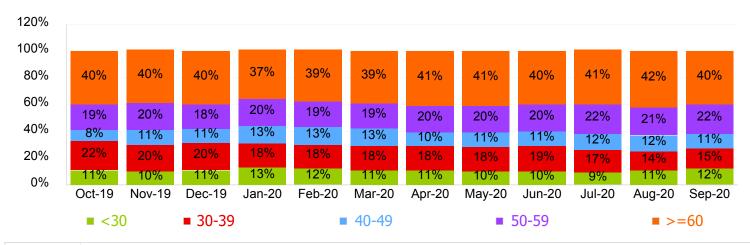


st A STAT event is an emergency medication prescribed and administered to a person involuntarily.

20. Demographics - Trend of Gender Distribution

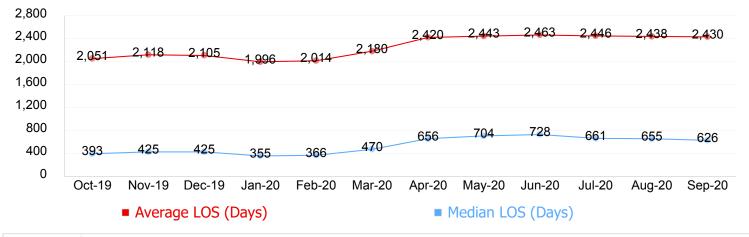


21. Demographics - Trend of Age Distribution



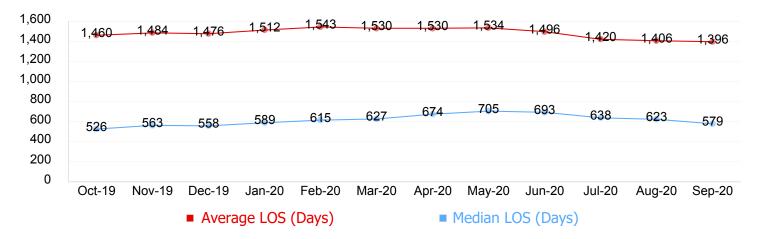
Age Group	Rate												
	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Avg
<30	11%	10%	11%	13%	12%	11%	11%	10%	10%	9%	11%	12%	11%
30-39	22%	20%	20%	18%	18%	18%	18%	18%	19%	17%	14%	15%	18%
40-49	8%	11%	11%	13%	13%	13%	10%	11%	11%	12%	12%	11%	11%
50-59	19%	20%	18%	20%	19%	19%	20%	20%	20%	22%	21%	22%	20%
60+	40%	40%	40%	37%	39%	39%	41%	41%	40%	41%	42%	40%	40%

22. Length of Stay - Average and Median Length of Stay for Individuals in Care



Туре		Individuals In Care												
	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20		
Average LOS	2,051	2,118	2,105	1,996	2,014	2,180	2,420	2,443	2,463	2,446	2,438	2,430		
Median LOS	393	425	425	355	366	470	656	704	728	661	655	626		

23. Length of Stay - Length of Stay for Individuals in Care with Civil Legal Status



Туре		Civil												
	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20		
Average LOS	1,460	1,484	1,476	1,512	1,543	1,530	1,530	1,534	1,496	1,420	1,406	1,396		
Median LOS	526	563	558	589	615	627	674	705	693	638	623	579		